

Hospital at Night

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Aims

We aim to introduce a Hospital at Night service to improve patient safety and junior doctor training at Great Western Hospital (GWH) in Swindon by winter 2018. We will do this by improving efficiency of overnight clinical work, with additional staffing and different ways of utilising clinical staff and information technology (IT) systems. We also aim to improve nursing training, development and retention by providing opportunity for nursing progression within the advanced clinical practitioner (ACP) model.

Methods

This is a service development project. National data shows that Hospital at Night services make clinical care safer, and locally there is evidence of the need for improving patient care overnight. In addition, improvements to junior doctor training and support are required as per deanery mandate and exception reports.

Initial data was collected and services elsewhere reviewed to decide what is needed in GWH. We have used a multipronged approach to the project by introducing an ACP role who will coordinate the hospital at night, and also an IT solution to triage tasks and remove the need for bleeps overnight. The doctors will work differently to provide more flexibility and cross cover of specialties as needed. We have been running a pilot with the ACP role in place, and the next stage is submission of business case for trust review in May 2018.

Results

The pilot of having an ACP to support the wards has shown a reduction in ward-based workload for medical doctors as the ACP is taking on that work. This has enabled earlier clerking of new patients to the hospital and increased numbers of patients being clerked overnight, with potential benefits for patient flow. It has also shown an improvement in the junior doctors' perception of support overnight and improved their ability to take contractual breaks during night time working along with satisfying deanery concerns regarding support for junior doctors overnight.

Conclusion

Hospital at Night is needed in GWH for multiple reasons, and the pilot is making good progress in improving patient safety and reducing time taken to provide clinical assessment. Work is ongoing and pending the outcome of the business case, more conclusions can be drawn at that time. ■

Conflict of interest statement

None.

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